## **Statement of Senator Maria Cantwell**

Special Committee on Aging and the Sub-committee on Aging Joint Hearing: Women, Long-Term Care, and Caregiving February 6, 2002

Thank you, Senator Mikulski and Senator Breaux. I appreciate the opportunity to testify at today's hearing, and I want to express my gratitude for the leadership you both have shown on this topic over the years.

I believe that Congress has a responsibility to ensure that families have adequate resources to care for their loved ones. I know that I am extremely lucky – I have the honor of representing the people of the State of Washington here in the Senate, and my mother is healthy. But not everyone is as blessed as I am. Women are major stakeholders in the debate on long-term care policy because we are over-represented as both caregivers and recipients of care.

As the Committee knows, with only about 1.6 million individuals residing in nursing homes, most people who need long-term care receive it in home and community-based settings. In fact, the American health care system relies heavily on informal caregiving – to the tune of \$200 billion in uncompensated care annually. And there is no doubt that as the baby-boomers retire in the coming decades, as well as continue to tend to their own parents' needs, long-term care services will be in much greater demand.

Issues surrounding long-term care — availability, quality, cost, and other public policies — have a disproportionate impact on women. And worries about long-term care do not begin when illness or disability strikes women personally. Because women make up nearly three-quarters of the informal, unpaid caregivers in this country, the worries begin when middle-aged women start to provide care for their elder parents, parents-in-law, other family members, or friends.

Most informal caregivers are in their mid-forties to mid-fifties, work full time, and may also be primary caregivers for their children or grandchildren. In order to accommodate the extra hours and commitment required of them, informal caregivers often must curtail their own professional advancement, reducing both their current earnings as well as future retirement benefits. And while women are most likely to need respite from our caregiving duties, we are least likely to receive it.

Many factors exacerbate the problems facing women when we decide how to address our long-term care needs. We live an average of seven years longer than men. We are more likely to live with multiple chronic health problems requiring long-term care services such as arthritis, hypertension, or osteoporosis. And we are also more likely to face poverty than men during retirement, making purchase of private long-term care services difficult if not impossible.

I believe both state and federal policy makers have a duty to ensure the long-term care security of our constituents. I wholly applaud the work done in the last few years by Senators Mikulski and Breaux to establish the National Family Caregiver Program. And as today's hearing demonstrates, this will not be the end of the debate. We need to continue to focus on how to improve access, how to ensure quality, and especially how to lower both private and public costs of these vital services.

Thank you, Senators Mikulski and Breaux for inviting me to testify at this hearing. I am confident that together we will be able to ensure that women and our families have adequate resources to care for our loved ones.